

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO.
APPLICANT'S

09/4653X8

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	INO.	DEP.	INO.	DEP.	INO.	DEP.
1						
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TOTAL INO.	2					
TOTAL DEP.	36					
TOTAL ITEMS	38					

INO.	DEP.	INO.	DEP.	INO.	DEP.
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TOTAL INO.	2				
TOTAL DEP.	36				
TOTAL ITEMS	38				